

December 31, 2008

Dear LEA Provider,

Subject: Resubmission of Claims Denied for Other Health Coverage

The Local Educational Agency (LEA) conversion from local to national codes occurred in July 2006 and introduced new procedure codes; however, not all applicable procedure codes were exempt from other health coverage (OHC) requirements until date of processing August 25, 2008. Therefore, some claims were erroneously denied with OHC Remittance Advice Detail (RAD) reason codes. The following reasons were most common:

- 311: Recipient is not eligible for Medi-Cal benefits without complete denial coverage statement from PHP/HMO (Prepaid Health Plan/Health Maintenance Organization).
- 657: Recipient not eligible for Medi-Cal benefits until payment/denial information is given from other insurance carrier.
- 015: Medi-Cal benefits cannot be paid without proof of payment/denial from Kaiser.
- 013: Medi-Cal benefits cannot be paid without proof of payment/denial from CHAMPUS.
- 647: Recipient not eligible for Medi-Cal benefits without complete denial of coverage letter from private insurance carrier.

In addition to the most common RAD codes identified above, some claims were denied with OHC RAD codes 231, 332, 355, 640, 648 and 656.

No action is required on your part. EDS, an HP company, has resubmitted the outstanding affected claims for dates of service on or after October 1, 2006. These resubmitted claims will be paid, or denied for a valid reason, on RADs beginning January 8, 2009, with Claim Control Number (CCN) prefixes **835955** and **836155**.

If you disagree with any of these resubmits, you may submit a *Claims Inquiry Form* (CIF) within six months of the new RAD date. For CIF completion instructions, please refer to the *CIF Completion* and *CIF Special Billing Instructions* sections in the appropriate Part 2 manual or on the Medi-Cal Web site (www.medi-cal.ca.gov).

If you have questions, please call the Telephone Service Center (TSC) at 1-800-541-5555, option 11, followed by option 18.

Sincerely,

Nona Carpenter

Provider Relations Director

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Reference Numbers: P10119